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Bib Data Sheet

CONFIRMATION NO. 3363

<b>SERIAL NUMBER</b> 09/596,174	<b>FILING DATE</b> 06/16/2000 <b>RULE</b>	<b>CLASS</b> 360	<b>GROUP ART UNIT</b> 2753	<b>ATTORNEY DOCKET NO.</b> 450100-2828.7
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**APPLICANTS**

Teruhiko Kori, Kanagawa, JAPAN;  
Harumi Kawahura, Tokyo, JAPAN;  
Hisato Kawahura, Tokyo, JAPAN;

\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

JAPAN 04-217503 07/24/1992

IF REQUIRED, FOREIGN FILING LICENSE  
GRANTED \*\* 08/29/2000

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 27	<b>TOTAL CLAIMS</b> 10	<b>INDEPENDENT CLAIMS</b> 2
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <u>Re</u> Initials				

**ADDRESS**

20999

**TITLE**

Methodologies for reproducing video signals stored on media which incorporate separate memory circuit

<b>FILING FEE RECEIVED</b> 690	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
		<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
		<input type="checkbox"/> 1.18 Fees ( Issue )
		<input type="checkbox"/> Other _____
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CONFIRMATION NO. 3363

<b>SERIAL NUMBER</b> 09/596,174	<b>FILING OR 371(c) DATE</b> 06/16/2000 <b>RULE</b>	<b>CLASS</b> 386	<b>GROUP ART UNIT</b> 2616	<b>ATTORNEY DOCKET NO.</b> 450100-2828.7
<b>APPLICANTS</b> Teruhiko Kori, Kanagawa, JAPAN; Harumi Kawahura, Tokyo, JAPAN; Hisato Kawahura, Tokyo, JAPAN;				
<b>** CONTINUING DATA *****</b>				
<b>** FOREIGN APPLICATIONS *****</b> JAPAN 04-217503 07/24/1992				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 08/29/2000</b>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>RL</i>		<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 27	<b>TOTAL CLAIMS</b> 10
Verified and Acknowledged Examiner's Signature _____ Initials _____		<b>INDEPENDENT CLAIMS</b> 2		
<b>ADDRESS</b> 20999				
<b>TITLE</b> RECORDING MEDIUM CARTRIDGE WITH MEMORY CIRCUIT EMPLOYING A HIERARCHICAL DATA STRUCTURE				
<b>FILING FEE RECEIVED</b> 690	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	